California MEDICINE

PR—One Year Later

THE DESIGNATION "PR" has come more and more into medical usage in the past few years, to denote the public relations of the profession. Throughout the country, PR is becoming widely used and recognized, not as a symbol but as a program of the profession in achieving and publicizing its good deeds and eliminating its less fortunate incidents.

State medical journals, county society bulletins and national publications of the A.M.A. and other nationwide organizations are devoting important space to the programs and accomplishments of local, state and national groups in achieving "good performance, properly understood and adequately publicized."

The California Medical Association has long recognized the need of a high degree of performance in the field of public relations. Political and economic pressures, often based on misinformation, false premises or frankly political self-seeking have made the association extraordinarily alert to defend the position of medicine in this state by eliminating all possible causes of complaint by patients and by maintaining medical performance of the highest character. Only when these two functions are fully performed has medicine something to tell the public.

Just one year ago the C.M.A. set up its own public relations department. Staffed by a director and two associates, located in both northern and southern offices, this department has turned in its report for its first year of existence. The report makes excellent reading.

California's PR program was based initially on achieving two basic guarantees to the public. The first was the guarantee of the availability of the services of a doctor of medicine under any and all predictable circumstances. The second was the guarantee of recourse against real or fancied abuses of patients by physicians. Both guarantees revolve

around proper organization of the county societies, a form of organization which permits the sharing of burdens which may be placed upon physicians under the guarantee of services and which demands of society members an objective attitude in seeing to it that a complaining patient is given a square deal and a chance to be heard.

From this starting point, and with the caution in mind that the best progress is made by taking one step at a time, the public relations department has concentrated its activities toward perfecting, through the county societies, the methods of carrying out a few basic responsibilities which the public puts upon medicine. It has undertaken to explain to the public the distinctions between a doctor of medicine and the various other kinds of practitioners who deal with sick persons. It has helped to organize, and to publicize, the availability of physicians at all hours through well-planned medical society emergency telephone services. And it has arranged for the broadcast of radio programs which give further

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DWIGHT L. WILBUR, M.D. Editor
ROBERT F. EDWARDS Assistant to the Editor
Editorial Executive Committee:

ALBERT J. SCHOLL, M.D. Los Angeles H. J. TEMPLETON, M.D. Oakland EDGAR WAYBURN, M.D. San Francisco

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evidence of the high quality of training and service of California doctors of medicine.

Newspaper advertising copy headed "Your M.D." has appeared over the name of the appropriate county medical society in 716 newspapers circulated in all counties in California. These societies serve about 82 per cent of the total population of California.

Radio programs, each consisting of a 13-week series, have been scheduled on 91 radio stations in California as public service programs. The stations cover practically all of the state's population.

Emergency telephone service is now established in 31 of the 40 county societies of the state, representing better than 93 per cent of the C.M.A. membership and a like percentage of the general population.

These accomplishments, made possible only through the active work and cooperation of the county societies, are easily listed as statistics. Much more difficult is the task of making them work and of ironing out the many rough spots encountered in every instance. The department's staff has found its job to be at least a full-time chore. Travel, meetings, conferences and the insistent demand for perfection in detail have made extraordinary demands on the time and talents of the staff members. To their credit, they have discharged their obligations with an unusually high sense of integrity and with great capability.

The true measure of accomplishment in this, a field in which results admittedly are intangible, is the general response on the part of publishers, radio and television operators and others whose daily business is to report to the public and, directly or indirectly, to mould public opinion. By this measure, the C.M.A. performance gives every indication of meriting high praise. A recent example came in the case of a newspaper publisher who was happy to receive the true facts and to report them to his readers after a young man had secured considerable notoriety by offering to sell his eyes to secure funds to care for his mother, who had cancer. Through a member of the C.M.A. staff, the county society and a hospital, assurance was given the publisher that the mother could obtain needed care, regardless of her financial position, and the publisher was quick to give his readers this fact.

The pleasure of reporting good accomplishments is often mitigated by the realization that much more remains to be done. Thus, in honesty, the C.M.A. public relations department recognizes that its job is but fairly begun. Much remains to be done and many items will be added to the program, in orderly fashion, in the coming years. However, much groundwork has been done which will need little or no repetition. A higher sense of responsibility than they had before has been instilled into some county societies and some members. A good portion of the public has been favorably impressed with the desire of the medical profession to do a good job, professionally, ethically and economically. With this background, we can look to the future with more optimism than we have had in the past and with confidence in attaining the goal of "good performance, properly understood and adequately publicized."

LETTERS to the Editor . . .

Psychosomatic Kidney Stones

Butt and Hauser¹ of Butt-Douglas Medical Foundation, Pensacola, Florida, report detailed physiochemical studies of the urines of 680 individuals of different ethnic groups in Florida and islands of the Pacific. They found a correlation between the presence or absence of hydrophilic colloids in these urines and the tendency of patients to develop kidney stones. In the absence of such colloids kidney stones are relatively frequent, while stones rarely form in the presence of protective urinary colloids.

Therapeutic test of this conclusion was made on a patient with multiple bilateral rapidly forming recurrent kidney stones. The urine of this patient showed numerous microscopic crystals. One hour after subcutaneous injection of 300 TR-units of hyaluronidase, his urine became free from crystals. Hyaluronidase therapy was therefore instituted in twenty similar cases and continued for a period of eleven to fifteen months. During this time eighteen of these patients remained free from recurrent urinary calculi.

As a collateral observation Butt and Hauser noted that "the formation of protective colloids in the human body virtually disappears during times of strong emotional stress," a conceivable basis for some future psychosomatic theory of kidney stones.

W. H. MANWARING, M.D. Palo Alto

REFERENCE

1. Butt, A. J., and Hauser, E. A.: The importance of protective urinary colloids in the prevention and treatment of kidney stones, Science, 115:308, Mar. 21, 1952.